

29/10 2018 MON 13:39 FAX

MSME18140053 / SME Motor Pte Ltd - Kaki Bukit
 ENTRY DATE & TIME: 29/10/2018 13:36
 SUBMITTED BY: Chia Pei Ying

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report 29/10/2018 13:36
 Date Of Accident 28/10/2018 12:10
 Exact Location Of Accident PIE TWDS CHANGI AIRPORT BEFORE STEVENS RD EXIT ON
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SDZ9002B
 Insured/Policyholder
 Name Of Registered Owner HELEN TAN SHIN SHIN
 NRIC No S7120274G
 Email Address NOEMAIL
 Mobile Phone No (LOCAL) +65-93876151
 Alternative Phone No OFFICE-93876151

Vehicle Particulars

Manufacturer HONDA
 Model VEZEL
 Exact Purpose for which vehicle was being used at time of accident
 Are you claiming under your own insurance policy for repair to your vehicle? NO
 If No, Please state action to be taken THIRD PARTY
 Vehicle Category PRIVATE CAR

Insurance Company

Name of Insurance Company LIBERTY INSURANCE PTE LTD
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number SD18V09588/VPC/R03
 Cover Note Number

Driver

Name of Driver HELEN TAN SHIN SHIN
 NRIC No S7120274G
 Date Of Birth 15/06/1971
 Occupation INDOOR
 Date Of Driving Pass 31/01/2000
 Driving Experience 18 YEARS AND 8 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-93876151
 Fax Number
 Contact Number OFFICE-93876151
 Email Address NOEMAIL

Address BLK 809 WOODLANDS ST 81 #12-179
 Postcode 730809
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OWNER
 Vehicle Registration Number of Driver's Own Vehicle -
 Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident CHAIN COLLISION
 Weather Conditions RAINING
 Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO
 Number of vehicles involved in the accident
 Was any body injured in the Accident? NO
 Was any injured conveyed to hospital by ambulance? NO
 Was any other material or property damaged? YES
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
 Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police? NO
 If Yes, Please state which Police Station
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

I WAS TRAVELLING ALONG PIE TOWARDS CHANGI AIRPORT BEFORE STEVENS ROAD EXIT ON LANE 4. VEHICLES AHEAD SLOWED DOWN AND I FOLLOWED SUIT. MOMENTS LATER, VEHICLE B REAR ENDED MY VEHICLE. THERE WERE A TOTAL OF 3 VEHICLES INVOLVED IN THIS CHAIN COLLISION.

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? NO
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLR4064C
 Vehicle Make/Model/Colour
 Details Of Properties VEHICLE B
 Vehicle Category PRIVATE CAR
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLJ5982M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

VEHICLE C

PRIVATE CAR

Sketch Plan Pg. 1

SKETCH PLANIMPORTANT NOTICE

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5. Any false reporting may be referred to the Police for investigation.
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

X

Policyholder's Signature

Date & Time:

29/10/18
11:16am

X

Driver's Signature
(If driver is not the policyholder)
Date & Time:29/10/18
11:15 am

Reporting Centre Personnel's Signature

Name:

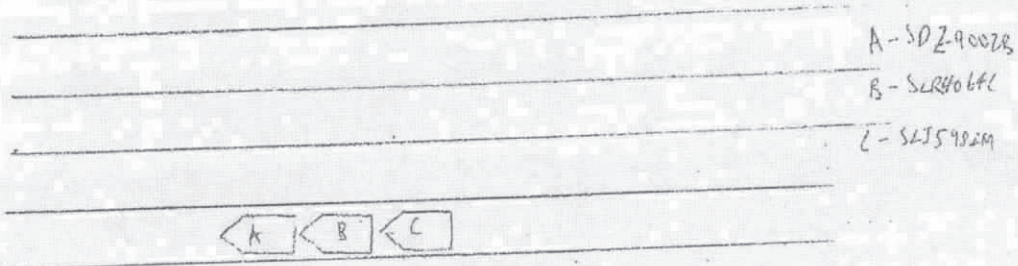
NRIC/FIN No.:

RYDER AUTO

Sketch Plan #2 Pg. 1

SKETCH PLAN

PIE TOWARDS CHANGI AIRPORT BEFORE STEVENS RD EXIT ON LANE 4



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG PIE TOWARDS CHANGI AIRPORT BEFORE STEVENS RD EXIT ON LANE 4. VEHICLES AHEAD SLOWED DOWN AND I FOLLOWED SUIT. MOMENTS LATER, VEHICLE B REAR-ENDED MY VEHICLE. THERE WERE A TOTAL OF 3 VEHICLES INVOLVED IN THIS CHAIN COLLISION.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

X *[Signature]*

Policyholder's Signature
Date & Time:

29/10/18
11:15am

X *[Signature]*

Driver's Signature
(If driver is not the policyholder)
Date & Time:

29/10/18
11:15am

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Ryder Auto Pte Ltd

1 Kaki Bukit Ave 6, #01-56, Autobay @ Kaki Bukit, Singapore 417883
Email: ryderautoworkshop@gmail.com
Fax: 64815390

Our Ref : SDZ9002B

Date : 29 October 2018

Lonpac Insurance Bhd
300 Beach Road
#17-04/07
The Concourse
Singapore 199555



Dear Sir,

PROPERTY DAMAGE CLAIM

CLAIMANT

: HELEN TAN SHIN SHIN (HELEN CHEN XINXIN)

ACCIDENT INVOLVING

: SDZ9002B & SLR4064C ALONG PIE TOWARDS CHANGI
AIRPORT BEFORE STEVENS RD EXIT ON LANE 4 ON 28
OCTOBER 2018

We act for **HELEN TAN SHIN SHIN (HELEN CHEN XINXIN)**, the owner of vehicle no. **SDZ9002B**, which was involved in the aforesaid accident.

Kindly be notified that we are claiming against your insured motor vehicle no. **SLR4064C** for damages, costs and disbursements as a result of your insured driver's negligence. Kindly let us know if you wish to conduct a pre-repair inspection on our client's motor vehicle at our workshop, 1 Kaki Bukit Ave 6, #01-56, Autobay @ Kaki Bukit, Singapore 417883.

Please arrange with the undersigned via mobile 90908277 Mr Orson or 97924673 Mr Chan. Kindly reply within the next two (2) working days or we shall proceed with our own necessary procedures and repairs.

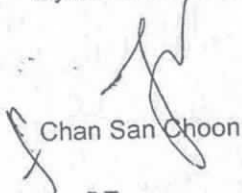
This PRS is on a "Direct Settlement" basis, hence we shall be furnishing an estimate for your surveyor to finalise as soon as possible.

Kindly reply either via email, fax or mobile.


Thank you.

Yours faithfully,

Ryder Auto Pte Ltd


Chan San Choon

 **BOKSENG**
(heavy vehicles, marine vessels)

@ Bluwel 2088 
(motorbike, cars, light vehicles)

 **Authorised Workshop**
Authorised Reporting Centre

8778 1999
24 hr accident call